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U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:		Case Number:				
An appearance is hereby filed by the undersigned as attorney for:						
Attorney name (type o	or print):					
Firm:						
Street address:						
City/State/Zip:						
Bar ID Number: Telephone (See item 3 in instructions)			1 s	Number:		
Email Address:						
Are you acting as lead counsel in this case?					Yes	No
Are you acting as local counsel in this case?					Yes	No
Are you a member of the court's trial bar?					Yes	No
If this case reaches tri	rial attorne	y?	,	Yes	No	
If this is a criminal cas	F	Retained Counsel				
		Appointed Counsel If appointed counsel, are you				
	_	a Federal Defender			•	
		CJA Panel Attorney				
general bar or be granted I declare under penalty of	his Court an attorney must leave to appear pro hac vic perjury that the foregoing is as the same force and effect	e as provided true and cori	d fo	or by local ct. Under 2	rules 83.12 28 U.S.C.§1	through 83.14. 746, this
Executed on						
Attorney signature:	S/(Use electronic signature	if the appeara	an	ce form is	filed electro	onically.)